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FORM-APPROVED

OMB NO. 0938-0391

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 445421	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 03/05/2012
NAME OF PROVIDER OR SUPPLIER LIFE CARE CENTER OF SPARTA			STREET ADDRESS, CITY, STATE, ZIP CODE 508 MOSE DRIVE SPARTA, TN 38583		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE	
K 038 SS=D	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>Exit access is arranged so that exits are readily accessible at all times in accordance with section 7.1. 19.2.1</p> <p>This STANDARD is not met as evidenced by: Based on observations, it was determined the facility failed to maintain the exit access.</p> <p>The findings included:</p> <ol style="list-style-type: none"> 1. Observation of the kitchen on 3/5/12 at 9:59 AM, revealed the kitchen corridor exit door was obstructed by a glass cart. 2. Observation of the dinning room on 3/5/12 at 9:57 AM, revealed the path of egress was obstructed by dietary carts. <p>These finding was acknowledged by the executive director and verified by the plant manager during the exit conference on 3/5/12.</p>	K 038	<p>K 038</p> <p>The glass cart was removed from in front of the exit door by the Maintenance Director to provide a clear unobstructed exit from the kitchen. The dietary carts were removed from the path of egress in the dining room to provide a clear unobstructed path of egress by Maintenance Director.</p> <p>An inspection of other exit doors and paths of egress throughout the facility was conducted to ensure other exits were readily accessible and were clear of obstructions by the Maintenance staff. Other exits and paths of egress were found to be in compliance.</p> <p>Dietary associates were in-serviced on the importance of keeping the exits and paths of egress free from obstruction by the Dietary Manager. The tile in the dining room between the exit doors will be changed to a different color to serve as a visual reminder that the area with the new white tile is a path of egress and to be kept clear of glass carts and dietary carts, by a contractor, and completed before April 13, 2012.</p> <p>Maintenance Director will inspect the kitchen and dining room exits to ensure exits are readily accessible monthly until 3 continuous months of 100% compliance</p> <p>Maintenance Director will report any discrepancies to Performance Improvement Committee, consisting of Interdisciplinary Team made up of the Medical Director, DON, ED, and other department heads, for further recommendations if needed.</p>	<p>3/8/12 3/5/2012</p> <p>4/13/12</p>	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.